

STATEMENT OF DESIGNATION OF COUNSEL

Please use one form for each respondent

MUR 5225

NAME OF COUNSEL: _____

FIRM: Harland W. Braun
1880 Century Park East, Ste. 710
Los Angeles, CA 90067-1608

ADDRESS: _____

TELEPHONE: (310) 277-4777

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COMMISSION
OFFICE OF GENERAL
COUNSEL

The above-named individual is hereby designated as my counsel and is authorized to receive any notifications and other communications from the Commission and to act on my behalf before the Commission.

Harland W. Braun
Print Name
[Signature] Signature
8/15/01 Date
Title

RESPONDENT'S NAME: Stephen M. Gordon

ADDRESS: 90182B

TELEPHONE: HOME()

BUSINESS()

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